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Items of Interest:

You Can Quit Smoking! Make 2007 the year you or someone close to you quits smoking. Smoking harms nearly every organ of the body, causing many diseases and reducing the health of smokers in general. Quitting smoking has immediate as well as long-term benefits for you and your loved ones. You CAN quit smoking. The following information may be helpful to your efforts. If you're looking to quit, we encourage you to contact **1-800-QUIT-NOW** or **www.smokefree.gov** for additional support. You are NOT alone:

- In 2005, 45.1 million adults (20.9 percent) in the U.S. were current smokers—23.9 percent of men and 18.1 percent of women. An estimated 70 percent of these smokers said they wanted to quit.
- An estimated 19.2 million (42.5 percent) adult everyday smokers in 2005 had stopped smoking for at least 1 day during the preceding 12 months because they were trying to quit.

Navy and Marine Corps Medical News

A Public Affairs Publication of the Bureau of Medicine and Surgery

Gerald R. Ford, Former President and Sailor, Dies

From Navy News Service

WASHINGTON - Former President Gerald R. Ford passed away Dec. 26 at his home in Rancho Mirage, Calif. He was 93.

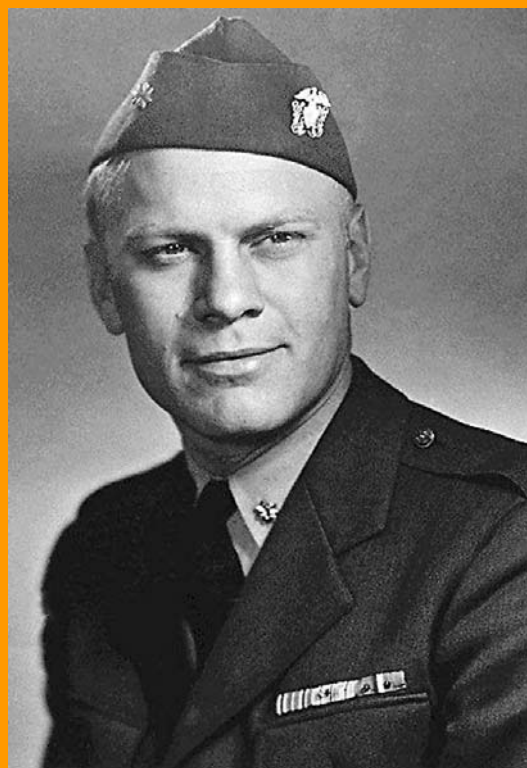
When he entered the White House in 1974 as the 38th President, Gerald Rudolph Ford, Jr. became the fourth consecutive President to have served in the U.S. Navy.

"President Ford was a great man who devoted the best years of his life in serving the United States", said President George W. Bush in a statement from his Crawford, Texas ranch. "He was a true gentleman who reflected the best in America's character. Before the world knew his name, he served with distinction in the United States Navy and in the United States Congress."

Ford received his commission as an Ensign in the U.S. Naval Reserve on April 13, 1942. On April 20, he reported for active duty to the V-5 instructor school at Annapolis, Md. After a month of training he reported to the Navy Preflight School in Chapel Hill, N.C., where he taught elementary seamanship, ordnance, gunnery, first aid, and military drill. He was promoted to Lt. j.g. in June 1942, and to Lt. in March 1943, while assigned to the Preflight School.

In May 1943, Ford was sent to the pre-commissioning detachment for a new light aircraft carrier, USS Monterey (CVL-26) at New York Shipbuilding Corporation, Camden, N.J. From the ship's commissioning

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WASHINGTON - Lt. Cmdr. Gerald Ford in uniform 1945, who later became the 38th President of the United States (1974-1977). Ford received his commission as an Ensign in the U.S. Naval Reserve on April 13, 1942 and later participated in many actions in the Pacific aboard the fast aircraft carrier USS Monterey (CVL 26). He was eventually released from active duty under honorable conditions in Feb. 1946. President Ford, 93, passed away on Dec. 26, 2006 at his home in Rancho Mirage, Calif. Department of Defense file photo

Task Force on Future of Military Healthcare Established

Department of Defense Press Release (OSD(PA))

WASHINGTON - Deputy Defense Secretary Gordon England announced today the names of the 14-member future military healthcare task force; the task force will evaluate and recommend alternatives to ensure the stability of military medicine over the long term.

As directed by Congress in the National Defense Authorization Act for 2007, the task force will include seven members from within the department and seven experts from a variety of disciplines external to the department. Task force members are identified below.

"The military health program has many important challenges, the most critical being the rapidly growing costs of health benefit coverage," said England, "and the need to make adjustments so this great program can continue far into the future. We in the department and in the Congress look forward to the task force's recommendations."

The task force has a slate of objectives that includes assessment and recommendations on wellness initiatives, education programs, accurate cost accounting, universal enrollment, system command and control, procurement adequacy, military and civilian personnel mix, Medicare-eligible beneficiary needs, efficient and cost effective contracts, and the beneficiary-government cost share structure to sustain military health benefits over the long term. This cost sharing structure has significant priority in that the task force must report on this element in both the interim and the final reports.

Vice Chairman of the Joint Chiefs of Staff Adm. Edmund Giambastiani Jr. stated, "Military medicine is unmatched anywhere in the world. Our troops know they

have the best care should they need it, and they know their families at home have the same great care. As the leaders of this department, we have the responsibility to ensure this excellent healthcare continues for future generations of soldiers, sailors, Marines, and airmen and their families."

Task force membership resulted from considered coordination with the secretaries of the military services and interagency leaders. The defense secretary will receive the interim report of the task force in May 2007, and the final report in December 2007. Following review by the secretary, the report will go to the armed services committees of the Senate and the House of Representatives.

"The task force represents a broad group of individuals with outstanding expertise and knowledge of healthcare generally and also of military healthcare," said William Winkenwerder Jr., assistant secretary of defense for health affairs. "The group is bipartisan and includes recognized experts in quality, health benefit design, costs and actuarial projections, women's health, organization and delivery of healthcare, and national health policy. This is an impressive group of thoughtful and experienced people who care about military healthcare. We look forward to supporting their efforts, and I welcome their recommendations."

Task Force Members:

Department of Defense Members:

- Air Force Gen. John D. W. Corley, vice chief of staff, Headquarters U.S. Air Force

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Gerald Ford continued...

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on June 17, 1943, until the end of Dec. 1944, Ford served as the assistant navigator, athletic officer, and anti-aircraft battery officer aboard Monterey. While he was aboard, Monterey participated in many actions in the Pacific with the 3rd and 5th Fleets during the fall of 1943 and in 1944.

Ford was detached from the ship on Christmas Eve 1944, and sent to the Athletic Department of the Navy Pre-Flight School, St. Mary's College, Calif., where one of his duties was to coach football.

From the end of April 1945 to Jan. 1946, he was on the staff of the Naval Reserve Training Command at Naval Air Station, Glenview, Ill. as the staff physical and military training officer. He was

promoted to Lt. Cmdr. Oct. 3, 1945.

The future president was released from active duty under honorable conditions on Feb. 23, 1946. On 28 June 1963, the Secretary of the Navy accepted Ford's resignation from the Naval Reserve.

Ford earned the Asiatic-Pacific Campaign Medal with nine engagement stars for operations in the Gilbert Islands, Bismark Archipelago, Marshal Islands, Asiatic and Pacific carrier raids, Hollandia, Marianas, Western Carolines, Western New Guinea, and the Leyte Operation. He also received the Philippine Liberation with two bronze stars for Leyte and Mindoro, as well as the American Campaign and World War II Victory Medals.

History shows the former president's term in office began in the

midst of scandal, but as President Bush noted in his statement, Ford brought honor back to the highest office in the land.

"He assumed power in a period of great division and turmoil," said Bush. "For a nation that needed healing and for an office that needed a calm and steady hand, Gerald Ford came along when we needed him most."

"We mourn the loss of such a leader, and our 38th President will always have a special place in our nation's memory."

This article was compiled with information from www.fordlibrarymuseum.gov, www.history.navy.mil and www.whitehouse.gov.

Nurse Corps Communication Team Gets the News Out

From Bureau of Medicine and Surgery Public Affairs

WASHINGTON - With a community that stretches itself across the globe, the Navy Nurse Corps (NC) is continuously working to create new and improved ways to share information in a timely and efficient manner with its members. The NC Communication Team was established in the fall of 2006 for this purpose.

"Rear Adm. Christine Bruzek-Kohler, Director, NC, met with senior NC leaders back in Aug. 2006, to establish the priorities of the NC. Communication was a major topic of this meeting. Senior leadership was concerned that official, efficient and timely information was not being shared within the community and they wanted to rectify this situation. From this meeting the NC Communication Team was

born," said Lt. Cmdr. Newton Chalker, Corps Chiefs Action Officer.

The team is comprised of 24 members. These members are responsible for six cornerstone products: NC admiral's regional senior nurse executives' call (every two months), Admiral's all NC community VTC (every six months), NC news live, newsletter (weekly), web homepage, and email groups.

According to Chalker, every six months, the director of the NC will hold a video teleconference (VTC) all hands call. This will provide corps members the opportunity not only see and hear the key NC messages the Admiral wishes to share, but also allows time for a question and answer session. For those members who are unable to attend the VTC, the meeting will be recorded for rebroadcast on the NC web homepage. The next VTC is

scheduled for March 2007.

The NC web homepage (<https://wwwa.nko.navy.mil/portal/splash/index.jsp>) has been in existence for sometime. As with any product, the NC felt it was time for a change in the web site. "With the idea of providing up-to-date and useful information, we, the NC, took a deeper interest in how our web site not only looked like, but also in how we are going to present that information to our community and to the public," said Chalker.

He continued, "Ownership of information is key in providing the most useful information for that particular NC community. NC has several communities within the overall NC community and we found that when a specific community, say NC Reservists, has ownership of

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Armed Services Blood Bank Center Comes to NBK Bangor

By Mass Communication Specialist 2nd Class (AW/NAC)
Eric J. Rowley and Mass Communication Specialist 3rd
Class Angela Grube, Fleet Public Affairs Center Detachment Northwest

SILVERDALE, Wash. - The Armed Services Blood Bank Center (ASBBC) from Madigan Army Medical Center, Tacoma, Wash., visited Naval Base Kitsap and the Bangor Fitness Center and Chapel Dec. 19 and 20 to collect blood for use at military hospitals all over the world.

The ASBBC is a team of medical technicians from the Army, Navy and Air Force, and Department of Defense (DoD) civilians that visit DoD stations throughout the Northwest up to five times a week.

Those who volunteer to give blood are carefully screened. Donors also must list all immunizations received over the past year, and are prohibited from giving blood if they have gotten a tattoo in the last 12 months.

"The first and biggest thing that causes people to not be eligible to donate blood right now is being deployed to Iraq or Afghanistan in the past 12 months," said ASBBC blood donor recruiter Marty Ricker.

According to ASBBC Mobile Operations Non-Commissioned Officer-in-Charge Air Force Tech. Sgt Francisco Lobos, his team has a goal of collecting about 95 pints of all blood types every week.

"Sometimes we can't fill our quota so we have to buy blood from civilian blood drive organizations," Lobos said. "These transactions can cost from \$300 to \$400 a pint because of the blood testing."

But saving the military money is not the reason do-

nors roll up their sleeves.

"It's common sense why you should give blood," said Hospital Corpsman 3rd Class (AW) Mary Moua, Naval Hospital Bremerton. "People need it, and over time, your body can replenish itself."

"I am here because I want to help," said Boatswain's Mate 3rd Class Javier Rangel. "And some day I might be in a situation where I need blood. The part that frightens me most is the initial poke," said Rangel. "This time was fine, but the last time I gave blood, she had to try a few times."

Once donors give a pint of blood, they are rewarded with juice and cookies. Then the donated blood is sent for testing.

"They must make sure it isn't carrying any diseases," said Hospital Corpsman 1st Class Jaselito Elaura, Naval Hospital Bremerton.

Donated blood undergoes a dozen different tests, including ones for HIV, Hepatitis B, and Hepatitis C. Once the blood is proven safe, a centrifuge separates its components. Red cells can be kept for 42 days, platelets for five days and plasma can be kept for 11 days. Plasma can also be frozen and kept for a year. Individual donors can give blood about once every eight weeks.

Moua said being part of the medical community influences her drive to give blood.

"If I refuse to give blood that would go against everything I stand for being a corpsman," said Moua. "Seeing where it goes first hand makes me understand why it's so important and appreciate life more."

NAVMED MPT&E Supports Council on Occ Ed Conference

From Navy Medicine Manpower, Training and Education Command Public Affairs and Navy Medicine Support Command Public Affairs

ATLANTA - Navy Medicine Manpower, Training and Education Command (NAVMED MPT&E) was represented by the command's supervisory instructional specialist during a joint panel discussion at the Council on Occupational Education (COE) conference in Atlanta in Nov. 2006.

Dr. Laurel Myers, Supervisory Instructional Systems Specialist, NAVMED MPT&E, joined representatives from the Army Management Staff College and the Defense Acquisition University to help participating DoD professional and technical schools ease the process of the COE self-study and accreditation visit. The self-study and accreditation visit is a program designed to help DoD schools prepare for academic accreditation.

"The COE is the national education accrediting agency the armed forces work with to, in part, help service members be more competitive for jobs when they leave the military," said Myers.

"If a Sailor graduates from an accredited military school and the school uses an additional accrediting body which assigns recommended credits by course, then the Sailor can apply for those credits to go toward a college degree," she stated. "Skills learned in the Navy course can also give the Sailor a competitive edge in the job market over others who have not been trained by a school accredited by the COE."

DoD requires all schools, including those under NAVMED MPT&E, to meet the standards of external accreditation. Myers said the message shared with the DoD schools at the COE conference was that schools do not need to go through the self study in a vacuum. Help is available.

"The information we presented not only allows schools to be armed with background information to help them



plan their self-study, but it also provides a helpful website for schools with little or no experience," said Myers.

The self-study and accreditation survey website is available for schools to use to share lessons learned to help each other through the sometimes difficult process, she said. The COE web address is www.council.org.

After the conference, Myers stated that the comments received from COE conference participants indicated the information on the website has been very helpful.

"In fact, a conference representative mentioned that she posted her entire self-study on the website so that it can be used by others as a guide in the creation of their own self-study report," she said.

According to Myers, the coordination of lessons learned will benefit schools across DoD and allow for strong colorations across organizations to meet the requirements of the COE self-study and accreditation visits. This process also brought the NAVMED MPT&E name to the forefront as a partner in guiding schools to the information sources that are available to help them through their COE self-studies.

NC communication continued...

(Continued from page 3)

their web page, they take pride in it. They want to their best foot forward and provide the type of information to their community that will of most use to their community members. Also, each web page provides a point of contact information to the community. If you have a question or comment about a particular community web page, you have access to a person who can assist you."

One of the more innovative creations of the NC communication team is the NC News Live web cast. "This is a live, dial-in show that allows our members to call in, ask

questions and discuss topics of interest," said Chalker. "The show is broadcasted on the NC web site and has been a huge success. Our next show is scheduled for Jan. 15 and will be both audio and video. We record each show and provide a link to the recording just in case someone misses the live show, but won't miss out on the information."

For NC community members who prefer a paper information format, the NC newsletter will suit your taste. "In this day of technological advances, people still like to have printed materials to receive information," said Chalker. "This is where the NC newsletter comes in. The newsletter is published every

week and is available online at the NC web site for members to download and print. Only official NC news and information is printed in the newsletter. Along with that information we also provide a section to highlight the good things individual folks are doing, our Bravo Zulus."

The information provided by the NC communication team is available to all members of the NC community, from NC officers to hospital corpsmen, for civilian and contractor personnel as well.

For more information about the NC Communication Team and its products, contact Lt. Cmdr. Chalker at njchalker@us.med.navy.mil.



PORTSMOUTH, Va. -
Chief Hospital Corpsman Tracy Adjip performs a sonogram on a patient while trying to diagnose the source of abdominal pain during sick call aboard the Nimitz-class aircraft carrier USS Harry S. Truman (CVN 75) Dec. 18, 2006. *U.S. Navy photo by Mass Communications Specialist 3rd Class Kristopher Wilson*

Task Force continued...

(Continued from page 2)

- Retired Army Maj. Gen. Nancy Adams, former commander Tripler Army Medical Center and acting director, TRICARE Regional Office, North
- Navy Rear Adm. John Mateczun, Deputy Surgeon General
- Air Force Lt. Gen. James Roudebush, Surgeon General

- Air Force Maj. Gen. Joseph Kelley, deputy director of logistics for medical readiness, the Joint Staff
- Shay Assad, director of defense procurement and acquisition policy, Office of the Undersecretary for Acquisition, Technology and Logistics
- Retired Air Force Gen. Richard B. Myers, former chairman of the Joint Chiefs of Staff

Non Departmental Members:

- Robert J. Henke, assistant secretary for management, Department of Veterans Affairs
- Dr. Carolyn Clancy, director of the Agency for Healthcare Research and Quality, Department of Health and Human Services
- Gail R. Wilensky, Ph.D., elected member of the Institute of Medicine of the National Acad-

- emies and its governing council
- Robert F. Hale, senior fellow at the Logistics Management Institute and member of the Defense Business Board; formerly assistant secretary of the Air Force for financial management and comptroller
- Army Reserve Maj. Gen. Robert Smith, past president and current member of the Board of the Reserve Officers Association, and global controller, Vehicle Service & Programs, Ford Motor Co.
- Larry Lewin, founder of The Lewin Group and currently executive consultant on clinical and technology effectiveness, health promotion.
- Dr. Robert Galvin, director of global healthcare for General Electric.



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